## 01/26/2085 12:25 FAX 703 848 2981 RMH Law Ø 002/003 PART B - FEE(S) TRANSMITTAL Complete and send this form, together with applicable see(s), to: Mail Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 JAN 2 6 2005 Alexandria, Virginia 22313-1450 Ō (703) 746-4000 INSTRUCTIONS: 181 form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks I through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as a large transfer of the current correspondence address as many diffications. INSTRUCTIONS: 130 CURRENT CORRESPONDENCE ADDRESS (Note: Use Block ) for any change of siddress) Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. 11/17/2004 ROBERTS, MLOTKOWSKI AND HOBBES Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below. P. O. Box 10064 MCLEAN, VA 22102 01/26/2005 MGERREM2 00000198 502478 10601533 Cave (Detrivitor's name) Care 01 FC:2501 700.00 DA (Signature) 300.00 DA 02 FC:1504 26 (Dave 03 FC:8001 9.00 DA APPLICATION NO. FILING DATE ATTORNEY DOCKET NO FIRST NAMED INVENTOR CONFIRMATION NO. 10/601\_533 06/24/2003 John Paul Mood RMH10918 7681 TITLE OF INVENTION: HORIZONTALLY EXTENDIBLE GUARD FOR RESTRICTING ACCESS TO A RACK OF GOODS APPLN. TYPE SMALL ENTITY **15SUE FEE** PUBLICATION FEE TOTAL FEE(S) DUE DATE DUE nonprovisional YES <del>- \$68</del>5-700.00 \$300 1,000.00 02/17/2005 EXAMINER ART UNIT CLASS-SUBCLASS NOVOSAD, JENNIFER ELEANORE 3634 211-074000 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 2. For printing on the patent front page, list <u>ı Roberts, Mlotkowski</u> (1) the names of up to 3 registered patent artorneys or agents OR, alternatively, Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. & Hobbes (2) the name of a single firm (having as a member a registered automey or agent) and the names of up to 2 registered patent altomeys or agents. If no name is listed, no name will be printed. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Laurence P. Hobbes Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignce is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT 2 substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Please check the appropriate assignee category or categories (will not be printed on the patent) : 🚨 Individual 🗖 Corporation or other private group entity 🗖 Government The fellowing for/s) and and a

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